## L05000115536

(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(Sity/State/Zip/Filone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
<b>,</b> ,				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
·				

Office Use Only



900111458299

11/02/07--01008--004 \*\*25.00

07 NOV -2 PM 1: 09

SECRETARY OF STATE DIVISION OF CORPORATIONS

## **COVER LETTER**

	gistration Section		
Div	vision of Corporations		
SUBJECT	· · · · · · · · · · · · · · · · · · ·		
	(Name of L	mited Liability Company)	
The enclose filing.	sed member, managing member	or manager resignation and fee(s) are sub-	mitted for
Please retu	arn all correspondence concernia	g this matter to:	
Elizabe	th Katherine Gocsman		
	(Contact Person)		
Global E	Business Management I	LC.	
	(Firm/Company)		
220 Mir	acle Mile , suite 218		
	(Address)		
Coral G	ables, Fl, 33134		
	(City/State and Zip Code)		
For further	information concerning this ma	tter, please call:	
Katherir	ne Gocsman	_at (_786) 2877117	
(	(Name of Contact Person)	(Area Code & Daytime Telephone Nun	nber)
Enclosed p	lease find a check made payable \$25 Filing Fee	to the Florida Department of State for:	
	Jaza i ining i ee	\$55 Filing Fee & Certified Copy	
	COURIER ADDRESS:	MAILING ADDRESS:	
Registration of	n Section Corporations	Registration Section	_
Clifton Bui		Division of Corporations P.O. Box 6327	ı
	ative Center Circle	Tallahassee, Florida 323	1.4
	Florida 32301	rananassee, riblida 323	17

CR2E079 (5/06)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

<ol> <li>The name of the limited liability company as it ap of State is: Global Business Management</li> </ol>	•
of State is: Olobai Dusiness Wanagem	ent LLO.
2. This limited liability company was organized und Florida	ler the laws of:
3. The Florida document/registration number of this L05000115536	s limited liability company is:
4. I. Elizabeth Katherine Gocsman	_, hereby resign as a _manager
(Print Name of Person Resigning)	(Print Title)
of this limited liability company and affirm the line resignation in writing.	nited liability company has been notified of my
E. Phine Toons	
Signature of Resigning Member, Managing Mem	ber or Manager

Filing Fee: Certified Copy: \$25.00 (Required) \$30.00 (Optional)